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APPLICANTS
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**** CONTINUING DATA *******
 This application is a CON of 10/032,984 10/23/2001 PAT 6,723,129 and is a CON of 10/033,105 10/22/2001 PAT 6,706,072
 and said 10/032,984 10/23/2001
 claims benefit of 60/246,854 11/08/2000
 and said 10/033,105 10/22/2001
 claims benefit of 60/246,854 11/08/2000

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 05/22/2004**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Amradhho Ranao AK</i> Examiner's Signature Initials	STATE OR COUNTRY IN	SHEETS DRAWING 13	TOTAL CLAIMS 8 14	INDEPENDENT CLAIMS x 4
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TITLE
 Self-locking modular prosthesis

FILING FEE RECEIVED 970	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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